



03500.011080.9

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
YOSHIKAZU BANNO ET AL.) : Examiner: B.K. Talbot
Application No.: 10/757,630) : Group Art Unit: 1762
Filed: January 15, 2004) :
For: METHOD FOR PRODUCING) :
AN ELECTRON-EMITTING) :
DEVICE (As Amended)) : September 6, 2005

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

PRELIMINARY AMENDMENT

Sir:

A Request for Continued Examination is being filed herewith. Preliminary
to continued examination, and in reply to the Office Action of June 6, 2005, please amend
the above-identified application as follows.

09/12/2005 HBIZUNES 00000006 10757630

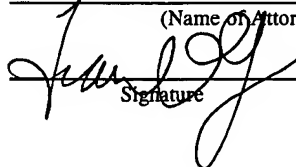
01 FC:1202 600.00 OP
02 FC:1201 1000.00 OP

I hereby certify that this correspondence is being deposited with the
United States Postal Service as first-class mail in an envelope
addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria,
VA 22313-1450 on September 6, 2005.

(Date of Deposit)

FRANK A. DeLUCIA (REG. NO. 42,476)

(Name of Attorney for Applicant)



Signature

September 6, 2005

Date of Signature



In re Application of:

Docket No. 03500.011080.9

YOSHIKAZU BANNETT, AI

Application No.: 10/757,630

Examiner: B.K. Talbot

Filed: January 15, 2004

Group Art Unit: 1762

For: METHOD FOR PRODUCING AN
ELECTRON-EMITTING DEVICE (As Amended)

Date: September 6, 2005

THE COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Preliminary Amendment in the above-identified application.

☐ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 32	MINUS	** 20	= 12	x \$25 \$50	600.00
INDEP. CLAIMS	* 8	MINUS	*** 3	= 5	x \$100 \$200	1,000.00
Fee for Multiple Dependent claims \$180°/\$360						0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						1,600.00

- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☒ A check in the amount of \$ 1,600.00 is enclosed.
- ☐ Charge \$ _____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$ _____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$ _____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Frank A. DeLucia
Attorney for Applicants
Registration No.: 42,476

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